

CLAIMS ONLY							Application Number 10714791	Filing Date		
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
(131)							51			
132							52			
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48							98			
49							99			
50							100			
Total Indep							Total Indep			
Total Depend							Total Depend			
Total Claims							Total Claims			